

SUBMIT: COMPLETED APPLICATION, TAX  
STATEMENT AND FEE TO:  
Bayfield County  
Planning and Zoning Depart.  
PO Box 58  
Washburn, WI 54891  
(715) 373-6138

APPLICATION FOR PERMIT  
BAYFIELD COUNTY, WISCONSIN

Date Stamp (Required)

02 02 2014

Bayfield Co. Zoning Dept

ENTERED

Permit #:

Date:

Amount Paid:

Refund:

Temp. and Residence / Conversion

\$50

INSTRUCTIONS: No permits will be issued until all fees are paid.  
Checks are made payable to: Bayfield County Zoning Department.  
DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

TYPE OF PERMIT REQUESTED → <input checked="" type="checkbox"/> LAND USE		<input type="checkbox"/> SANITARY	<input type="checkbox"/> PRIVY	<input type="checkbox"/> CONDITIONAL USE	<input type="checkbox"/> SPECIAL USE	<input type="checkbox"/> B.O.A.	<input type="checkbox"/> OTHER
Owner's Name: <u>Thomas &amp; Karen Wacker</u>		Mailing Address: <u>9852 James Ave. NE, Monticello, MN</u>		City/State/Zip: <u>55362</u>		Telephone: <u>763</u>	
Address of Property: <u>69605 E. Long Lake Rd</u>		City/State/Zip: <u>Iron River, WI 54847</u>		City/State/Zip: <u>55362</u>		Telephone: <u>763</u>	
Contractor: <u>Self</u>		Contractor Phone: <u>Plumber:</u>		Agent Mailing Address (include City/State/Zip):		Written Authorization Attached <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Authorized Agent: (Person Signing Application on behalf of Owner(s))		Agent Phone:		Agent Mailing Address (include City/State/Zip):		Written Authorization Attached <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
PROJECT LOCATION	Legal Description: (Use Tax Statement)	PLN: (23 digits) <u>04-034-247-08-02-100-212-13000</u>	Vol & Page	Lot(s) No.	Block(s) No.	Recorded Document: (i.e. Property Ownership) Volume <u>972</u> Page(s) <u>953</u>	Subdivision: <u>2nd Add. to Long Lake</u>
<u>1/4, 1/4</u>	Gov't Lot	Lot(s)	Vol & Page	Lot(s) No.	Block(s) No.	Volume <u>972</u> Page(s) <u>953</u>	Subdivision: <u>2nd Add. to Long Lake</u>
Section <u>2</u> , Township <u>47</u> N, Range <u>8</u> W	Town of: <u>Iron River</u>		Lot Size		Acreage		<u>.87</u>

<input checked="" type="checkbox"/> Shoreland →	<input type="checkbox"/> Is Property/Land within 300 feet of River, Stream (incl. intermittent) Creek or Landward side of Floodplain? If yes—continue →	Distance Structure is from Shoreline: <u>  </u> feet	Is Property in Floodplain Zone? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Are Wetlands Present? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> Non-Shoreland	<input checked="" type="checkbox"/> Is Property/Land within 1000 feet of Lake, Pond or Flowage If yes—continue →	Distance Structure is from Shoreline: <u>  </u> feet		

Value at Time of Completion * include donated time & material	Project	# of Stories and/or basement	Use	# of bedrooms	What Type of Sewer/Sanitary System Is on the property?	Water
<u>\$ 0</u>	<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> 1-Story	<input type="checkbox"/> Seasonal	<input type="checkbox"/> 1	<input type="checkbox"/> Municipal/City	<input type="checkbox"/> City
	<input type="checkbox"/> Addition/Alteration	<input type="checkbox"/> 1-Story + Loft	<input checked="" type="checkbox"/> Year Round	<input checked="" type="checkbox"/> 2	<input type="checkbox"/> (New) Sanitary Specify Type: <u>  </u>	<input checked="" type="checkbox"/> Well
	<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story	<input type="checkbox"/> 3	<input checked="" type="checkbox"/> Sanitary (Exists) Specify Type: <u>  </u>		
	<input type="checkbox"/> Relocate (existing bldg)	<input type="checkbox"/> Basement	<input type="checkbox"/> 3	<input type="checkbox"/> Privy (Pit) or <input type="checkbox"/> Vaulted (min 200 gallon)		
	<input type="checkbox"/> Run a Business on Property	<input type="checkbox"/> No Basement	<input type="checkbox"/> None	<input type="checkbox"/> Portable (w/service contract)		
		<input type="checkbox"/> Foundation	<input type="checkbox"/> None	<input type="checkbox"/> Compost Toilet		

Existing Structure: (if permit being applied for is relevant to it)	Length: <u>30'</u>	Width: <u>24'</u>	Height: <u>20'</u>
Proposed Construction:			

Proposed Use	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	<input type="checkbox"/> Principal Structure (first structure on property)	( <u>  </u> X <u>  </u> )	
	<input type="checkbox"/> Residence (i.e. cabin, hunting shack, etc.)	( <u>  </u> X <u>  </u> )	
	<u>with Loft</u>	( <u>  </u> X <u>  </u> )	
	<u>with a Porch</u>	( <u>  </u> X <u>  </u> )	
	<u>with (2nd) Porch</u>	( <u>  </u> X <u>  </u> )	
	<u>with a Deck</u>	( <u>  </u> X <u>  </u> )	
	<u>with (2nd) Deck</u>	( <u>  </u> X <u>  </u> )	
<input checked="" type="checkbox"/> Commercial Use	<u>with Attached Garage</u>	( <u>  </u> X <u>  </u> )	
<u>REC'D FOR ISSUANCE</u>	<input type="checkbox"/> Bunkhouse w/ ( <input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities)	( <u>  </u> X <u>  </u> )	
<u>DEC 01 2014</u>	<input type="checkbox"/> Mobile Home (manufactured date) <u>  </u>	( <u>  </u> X <u>  </u> )	
<input type="checkbox"/> Municipal Use	<input type="checkbox"/> Addition/Alteration (specify) <u>  </u>	( <u>  </u> X <u>  </u> )	
<u>Secretarial Staff</u>	<input type="checkbox"/> Accessory Building (specify) <u>  </u>	( <u>  </u> X <u>  </u> )	
	<input type="checkbox"/> Accessory Building Addition/Alteration (specify) <u>  </u>	( <u>  </u> X <u>  </u> )	
<u>REC'D FOR ISSUANCE</u>			
<u>OCT 15 2014</u>	<input type="checkbox"/> Special Use: (explain) <u>  </u>	( <u>  </u> X <u>  </u> )	
	<input type="checkbox"/> Conditional Use: (explain) <u>  </u>	( <u>  </u> X <u>  </u> )	
<u>Secretarial Staff</u>	<input checked="" type="checkbox"/> Other: (explain) <u>Temp to and Residence</u>	( <u>24</u> X <u>30</u> )	<u>720</u>

FAILURE TO OBTAIN A PERMIT OR STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES  
I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information. I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner(s): Thomas & Karen Wacker

(If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Authorized Agent:

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Address to send permit Same as above

Attach  
Copy of Tax Statement  
If you recently purchased the property send your Recorded Deed

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE  
CONVERSION OR TEMP? CANNOT BE BOTH  
Tax ID 20639

Draw or Sketch your Property (regardless of what you are applying for)

- (1) Show Location of: **Proposed Construction**
- (2) Show / Indicate: North (N) on Plot Plan
- (3) Show Location of (\*): (\*) Driveway and (\*) Frontage Road (Name Frontage Road)
- (4) Show: All Existing Structures on your Property
- (5) Show: (\*) Well (W); (\*) Septic Tank (ST); (\*) Drain Field (DF); (\*) Holding Tank (HT) and/or (\*) Privy (P)
- (6) Show any (\*): (\*) Lake; (\*) River; (\*) Stream/Creek; or (\*) Pond
- (7) Show any (\*): (\*) Wetlands; or (\*) Slopes over 20%

See attachment

Please complete (1) - (7) above (prior to continuing)

(8) Setbacks: (measured to the closest point)

Changes in plans must be approved by the Planning & Zoning Dept

Description	Measurement	Description	Measurement
Setback from the Centerline of Platted Road	70+ Feet	Setback from the Lake (ordinary high-water mark)	170+ Feet
Setback from the Established Right-of-Way	30+ Feet	Setback from the River, Stream, Creek	NA Feet
Setback from the North Lot Line	15+ Feet	Setback from the Bank or Bluff	NA Feet
Setback from the South Lot Line	100+ Feet	Setback from Wetland	NA Feet
Setback from the West Lot Line	NA Feet	20% Slope Area on property	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Setback from the East Lot Line	NA Feet	Elevation of Floodplain	NA Feet
Setback to Septic Tank or Holding Tank	30+ Feet	Setback to Well	50+ Feet
Setback to Drain Field	30+ Feet		
Setback to Privy (Portable, Composting)	NA Feet		

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For The Construction Of New One & Two Family Dwelling: All Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

<b>Issuance Information (County Use Only)</b>		Sanitary Number: 367594	# of bedrooms: 2	Sanitary Date: 6-6-01		
Permit Denied (Date):		Reason for Denial:				
Permit #: 14-00067		Permit Date: 12-1-14				
Is Parcel a Sub-Standard Lot	<input checked="" type="checkbox"/> Yes (Deed of Record)	<input type="checkbox"/> No	Mitigation Required	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Affidavit Required	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is Parcel in Common Ownership	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Mitigation Attached	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Affidavit Attached	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is Structure Non-Conforming	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Previously Granted by Variance (B.O.A.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Case #:	
Granted by Variance (B.O.A.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Case #:	Were Property Lines Represented by Owner	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Was Property Surveyed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Was Parcel Legally Created	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Inspected by: M. Fuchs	Zoning District (R-1)			
Was Proposed Building Site Delineated	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Inspected by: M. Fuchs	Lakes Classification (2)			
Inspection Record:	Structure is existing					
Date of Inspection: 10-8-14	Date of Re-Inspection:					
Condition(s): Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input type="checkbox"/> No (If No they need to be attached)						
Existing structure must be removed with in 1 year from the date of issuance of this permit. Kitchen must be removed from the						
Signature of Inspector: Michael Fuchs						
Hold For Sanitary: <input type="checkbox"/>	Hold For TBA: <input type="checkbox"/>	Hold For Affidavit: <input type="checkbox"/>	Hold For Fees: <input type="checkbox"/>	Date of Approval: 10-9-14		

2nd residence (converted garage) when new residence (cabin) is built.

# MAP OF SURVEY

LOTS 28 AND 29 OF THE 2ND ADDITION TO LONG LAKE, LOCATED IN GOVERNMENT LOT 4 OF SECTION 2, T. 47 N., R. 8 W., IN THE TOWN OF IRON RIVER, BAYFIELD COUNTY, WISCONSIN

## SURVEYOR'S CERTIFICATE

I, TIMOTHY E. OKSUTA, REGISTERED LAND SURVEYOR IN THE STATE OF WISCONSIN, HEREBY CERTIFY:  
THAT ON THE ORDER OF THOMAS WACKER, I HAVE SURVEYED AND MAPPED LOTS 28 AND 29 OF THE 2ND ADDITION TO LONG LAKE, LOCATED IN GOVERNMENT LOT 4 OF SECTION 2, T. 47 N., R. 8 W., IN THE TOWN OF IRON RIVER, BAYFIELD COUNTY, WISCONSIN;  
THAT THIS MAP IS A TRUE REPRESENTATION OF SAID SURVEY; AND  
THAT SAID SURVEY IS CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.



BEARINGS ARE BASED ON THE NORTH LINE OF GOVERNMENT LOT 3 OF SECTION 2 ASSUMED AS N 89°27'08" W

## TREE KEY

WP - WHITE PINE  
RP - RED PINE  
JP - JACK PINE  
SP - SPRUCE  
BAL - BALSAM  
MA - MAPLE  
OAK - OAK  
WB - WHITE BIRCH  
ASP - ASPEN

## SETBACKS - CLASS 2 LAKE

OHWL - 75 FEET  
SIDEYARD - 20 FEET MIN./50 FEET TOTAL  
REAR YARD - 20 FEET  
ROAD - 63 FEET FROM C/L

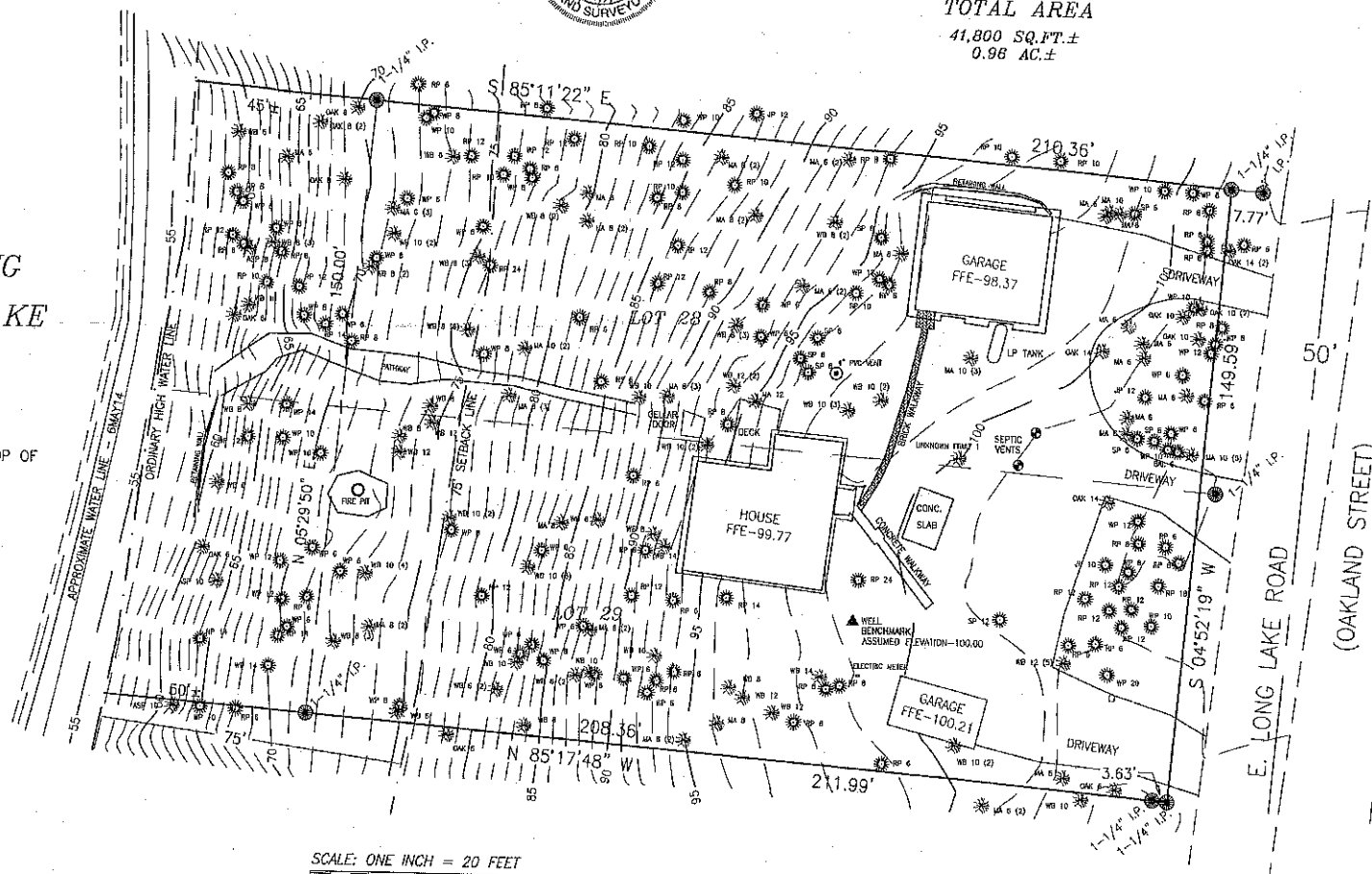
## KEY TO LABELS

MA 8 (2)  
SPECIES-DBH-MULTIPLE TRUNKS

LONG  
LAKE

## NOTES

BENCHMARK-A SCRIBED "X" ON THE TOP OF THE WELL COVER  
ASSUMED ELEVATION-100.00  
CONTOUR INTERVAL -ONE FOOT



SCALE: ONE INCH = 20 FEET



## LEGEND

● IRON PIPE FOUND IN PLACE, O.D. NOTED

JOB NO.: N14/033  
SCALE: ONE INCH = 20 FEET  
DATE: MAY 7, 2014  
NO. 397 PG. 23

DRAWN BY: T. OKSUTA  
FILE: N147NRH/SEC2  
PSDA/N14033 ACAD/N14033 WACKER TOPO

CLIENT: WACKER, T.

NELSON  
SURVEYING  
INCORPORATED  
SURVEYING NORTHERN WISCONSIN SINCE 1854

101 W. MAIN STREET  
SUITE 100  
ASHLAND, WISCONSIN 54806  
(715) 682-2692  
FAX: (715) 682-5100

MAP NO. 4316 ©

Permit #: 14-0451	
Date: 10-1-14	
Amount Paid: \$125	11-17-14
Refund:	

Bayfield Co. Zoning Dept.

Value at Time of Completion * include donated time & material	Project	# of Stories and/or basement	Use	# of bedrooms	What Type of Sewer/Sanitary System is on the property?	Water
~~~~~ \$ 20,000 _____	<input type="checkbox"/> New Construction	<input type="checkbox"/> 1-Story	<input type="checkbox"/> Seasonal	<input type="checkbox"/> 1	<input type="checkbox"/> Municipal/City	<input type="checkbox"/> City
	<input type="checkbox"/> Addition/Alteration	<input type="checkbox"/> 1-Story + Loft	<input checked="" type="checkbox"/> Year Round	<input checked="" type="checkbox"/> 2	<input type="checkbox"/> (New) Sanitary    Specify Type: _____	<input checked="" type="checkbox"/> Well
	<input checked="" type="checkbox"/> Conversion	<input checked="" type="checkbox"/> 2-Story	<input type="checkbox"/> _____	<input type="checkbox"/> 3	<input checked="" type="checkbox"/> Sanitary (Exists)    Specify Type: <u>Grav</u>	<input type="checkbox"/> _____
	<input type="checkbox"/> Relocate (existing bldg)	<input type="checkbox"/> Basement	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> Privy (Pit)    or <input type="checkbox"/> Vaulted (min 200 gallon)	<input type="checkbox"/> _____
	<input type="checkbox"/> Run a Business on Property	<input type="checkbox"/> No Basement	<input type="checkbox"/> Foundation	<input type="checkbox"/> None	<input type="checkbox"/> Portable (w/service contract)	<input type="checkbox"/> _____
<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> Compost Toilet	<input type="checkbox"/> _____	<input type="checkbox"/> None

Proposed Use	✓	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use  <input type="checkbox"/> Commercial Use  <input type="checkbox"/> Municipal Use	<input type="checkbox"/>	Principal Structure (first structure on property)	(      X      )	
	<input type="checkbox"/>	Residence (i.e. cabin, hunting shack, etc.)	(      X      )	
		with Loft	(      X      )	
		with a Porch	(      X      )	
		with (2 <sup>nd</sup> ) Porch	(      X      )	
		with a Deck	(      X      )	
		with (2 <sup>nd</sup> ) Deck	(      X      )	
		with Attached Garage	(      X      )	
	<input type="checkbox"/>	Bunkhouse w/ <input type="checkbox"/> sanitary, <u>or</u> <input type="checkbox"/> sleeping quarters, <u>or</u> <input type="checkbox"/> cooking & food prep facilities)	(      X      )	
	<input type="checkbox"/>	Mobile Home (manufactured date) _____	(      X      )	
	<input type="checkbox"/> Addition/Alteration (specify) _____	(      X      )		
	<input type="checkbox"/> Accessory Building (specify) _____	(      X      )		
	<input type="checkbox"/> Accessory Building Addition/Alteration (specify) _____	(      X      )		
Rec'd for Issuance				
	<input type="checkbox"/> Special Use: (explain) _____	(      X      )		
	<input type="checkbox"/> Conditional Use: (explain) _____	(      X      )		
	<input checked="" type="checkbox"/> Other: (explain) <u>Conversion to Residence</u>	( 24 x 30 )	720	

Authorized Agent:

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE

Attach  
Copy of Tax Statement

**If you recently purchased the property send your Recorded Deed**



See box below: Draw or Sketch your Property (regardless of what you are applying for)

- (1) Show Location of: **Proposed Construction**
- (2) Show / Indicate: North (N) on Plot Plan
- (3) Show Location of (\*): (\*) Driveway and (\*) Frontage Road (Name Frontage Road)
- (4) Show: All Existing Structures on your Property
- (5) Show: (\*) Well (W); (\*) Septic Tank (ST); (\*) Drain Field (DF); (\*) Holding Tank (HT) and/or (\*) Privy (P)
- (6) Show any (\*): (\*) Lake; (\*) River; (\*) Stream/Creek; or (\*) Pond
- (7) Show any (\*): (\*) Wetlands; or (\*) Slopes over 20%

See attachment

Please complete (1) – (7) above (prior to continuing)

(8) Setbacks: (measured to the closest point)

Changes in plans must be approved by the Planning & Zoning Dept.

Description	Measurement	Description	Measurement
Setback from the Centerline of Platted Road	70' ± Feet	Setback from the Lake (ordinary high-water mark)	170' ± Feet
Setback from the Established Right-of-Way	30' ± Feet	Setback from the River, Stream, Creek	NA' Feet
Setback from the North Lot Line	15' ± Feet	Setback from the Bank or Bluff	NA' Feet
Setback from the South Lot Line	100' ± Feet	Setback from Wetland	NA' Feet
Setback from the West Lot Line	NA' Feet	20% Slope Area on property	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Setback from the East Lot Line	NA' Feet	Elevation of Floodplain	NA' Feet
Setback to Septic Tank or Holding Tank	30' ± Feet	Setback to Well	30' ± Feet
Setback to Drain Field	30' ± Feet		
Setback to Privy (Portable, Composting)	NA' Feet		

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

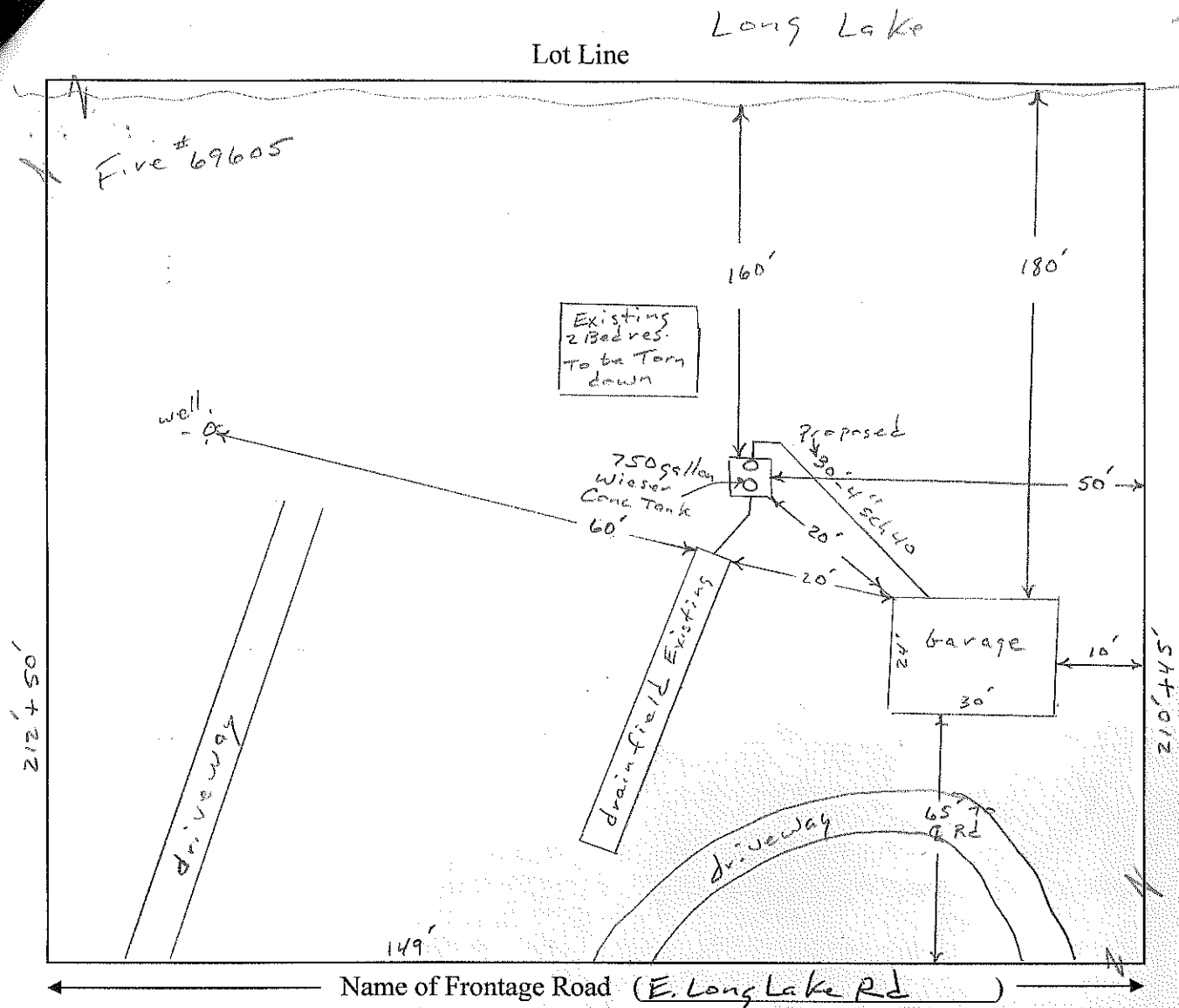
NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For The Construction Of New One & Two Family Dwelling: All Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

<b>Issuance Information (County Use Only)</b>		Sanitary Number: 367 594	# of bedrooms: 2	Sanitary Date: 6-6-01
Permit Denied (Date):		Reason for Denial:		
Permit #: 14-0451		Permit Date: 10-1-14		
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming		<input checked="" type="checkbox"/> Yes (Deed of Record) <input type="checkbox"/> Yes (Fused/Contiguous Lot(s)) <input type="checkbox"/> Yes		<input type="checkbox"/> No <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> No
Granted by Variance (B.O.A.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Case #:		Previously Granted by Variance (B.O.A.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Was Parcel Legally Created Was Proposed Building Site Delineated		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No		NA
Inspection Record: Structure is existing.				
Date of inspection: 10-8-14		Inspected by: M. Finkel		Zoning District (R-1) Lakes Classification (2)
Condition(s) Town Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input type="checkbox"/> No (If No they need to be attached.)				
No increase in structure's footprint or improving surface. Improving surface will be calculated prior to variance of LUP for new residence.				
Signature of Inspector: Michael Gravel		Date of Approval: 10-8-14		
Hold For Sanitary: <input type="checkbox"/>		Hold For TBA: <input type="checkbox"/>		Hold For Affidavit: <input type="checkbox"/>
		Hold For Fees: <input type="checkbox"/>		

will be converted to a ranch house upon construction of the new residence.



1. Name the frontage road and use as a guideline, fill in the lot dimensions and indicate North (N).
2. Show the approximate location and size of the building.
3. Show the location of the well, septic tank and drain field.
4. Show the location of any lake, river, stream or pond if applicable.
5. Show the approximate location of other existing structures.
6. Show the approximate location of any wetlands or slopes over 20 percent.
7. Show dimensions in feet on the following:

**IMPORTANT  
DETAILED PLOT PLAN  
IS NECESSARY, FOLLOW  
STEPS 1-7 COMPLETELY**

- |                                                         |                                                           |
|---------------------------------------------------------|-----------------------------------------------------------|
| a. Building to all lot lines                            | i. Privy to building                                      |
| b. Building to centerline of road                       | j. Privy to lake, river, stream or pond                   |
| c. Building to lake, river, stream or pond              | k. Drain field to closest lot line                        |
| d. Septic / holding tank to closest lot line            | l. Drain field to building                                |
| e. Septic/holding tank to building                      | m. Drain field to well                                    |
| f. Septic / holding tank to well                        | n. Drain field to lake, river, stream or pond $\geq 170'$ |
| g. Septic / holding tank to lake, river, stream or pond | o. Well to building                                       |
| h. Privy to closest lot line                            |                                                           |